

PCT/IFW \$



In re Application of:

KATSUNARI SUZUKI

Application No.: 10/533,100

Int'l App No.: PCT/JP2004/017036

Int'l Filing Date.: November 10, 2004

For: INFORMATION PROCESSING APPARATUS AND
INFORMATION PROCESSING METHOD

Docket No.

03500.102906.

Examiner: Taghi T. Arani

Group Art Unit: 2131

Date: March 21, 2007

Mail Stop Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	22	MINUS	22	= 0	x \$25 \$50	\$.00
INDEP. CLAIMS	4	MINUS	3	= 1	x \$100 \$200	\$200.00
Fee for Multiple Dependent claims \$180°/\$360						\$.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$200.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

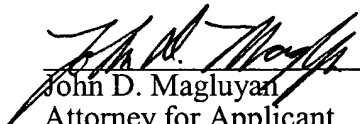
03/27/2007 MKAYPAGH 00000046 10533100

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200.00 OP

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 200.00 is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☒ A check in the amount of \$ 120.00 to cover the fee for a One month extension is enclosed.
- ☐ A check in the amount of \$ 180.00 to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



John D. Magluyan
Attorney for Applicant
Registration No.: 56,867

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